

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|---------------|--------|----------|
| FEE DETERMINATION | <i>mmmmmm</i> | | 10-16-01 |
| O.I.P.E. CLASSIFIER | | | 10-25-01 |
| FORMALITY REVIEW | CH | 1119 | 11-18-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|-----------|
| Final Original | |
| 1 | ✓ 2/1/03 |
| 2 | ✓ 4/24/03 |
| 3 | ✓ 6/11/03 |
| 4 | ✓ |
| 5 | ✓ |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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